

## Qualified Business Reply Mail (QBRM) Application

This application is made to distribute Qualified Business Reply Mail (QBRM) cards, envelopes, or self-mailers prepared and distributed for return without prepayment of postage under DMM E150 and S922. QBRM rates and the additional per piece charge will be paid on all pieces returned under this privilege.

Applicant agrees to prepare pieces in accordance with DMM E150, S922, C810, and C840, and understands that failure to conform with these requirements *may result in an inability to receive QBRM rates*. Applicant must submit this completed form and either:

- 1. 10 BRM samples, or;
- 2. 10 actual paper mockups cut to the dimension of the BRM piece, PMS ink color, and a pre-production sample or artwork.

QBRM special First-Class postage rates apply: (\$.18 for postcards, .30 for 1-oz. letter-sized, and .22 for each additional ounce or fraction), up to 2 ounces plus a \$.05 handling fee for each returned piece.

NOTE: The address of mailpieces distributed under the QBRM program must include the unique ZIP + 4 that is preassigned for the BRM piece and that identifies the type of BRM, the applicable rate, and the individual permit holder.

Enter each RDM 7	B + 4 and chack ( < ) to inc	dicate the rate(s) at which you	ur ORPM will be returned:	
ZIP + 4	Postcard Rate (\$.18 + .05 = .23)	1 Oz. Letter Rate (\$.30 + .05 = .35)	2 Oz. Letter Rate (\$.30 + .22 + .05 = .57)	
Permit Information				
Permit No.		City and State of Issue		
Holder's Name				
Mailpiece Informati	on			
Attention Line				
Company/Organization Name				
Street/PO Box				
City, State, ZIP + 4				
Contact Person				
Printed Name  Title		By signing this application, I certify that all future QBRM envelopes/cards will be produced with equivalent paper stock, and meet the paper thickness requirements of 0.007 inch for postcard dimension, and 0.009 inch for letter-size dimension.		
		NOTE: failure to meet require receive QBRM rates.	ements may result in an inability to	
Telephone No.	Fax Number	Signature	Date	
/				

Send completed form and attachments to: (Enter no., street, city, state, and ZIP + 4)

MGR BUSINESS MAIL ENTRY UNITED STATES POSTAL SERVICE



## Qualified Business Reply Mail (QBRM) Application Approval

•	Permit No.`	City and State of Issue			
	Effective Date				
	Organization I	Name, Street/PO Box, City, State, ZIP + 4			
	-				
Dear Customer,					
Your application for entry into the Qualified Bu post office is:	ısiness Reply Mail (Q	BRM) program at the			
Approved					
Attached is a sample BRM piece ap postcard rate of \$.18. A handling ch		If First-Class reduced rate of \$.30 per oz., and QBRM			
You must have an established Business Reply Mail postage account at the post office named above. The annual permit fee is \$100. A \$300 accounting fee is required at each post office where BRM will be returned.					
☐ Not approved for the following reason	on(s):				
DMM S922 Requirements □ M	let □ Not Met				
DMM E150 Requirements □ M	let □ Not Met				
DMM C810 Requirements	let □ Not Met				
DMM C840 Requirements □ M	let □ Not Met				
Specify requirement(s) not met and provide necessary corrective action(s)					
isposition					
proval Signature Signature		Date			